## Truth in Testimony Disclosure Form

In accordance with Rule XI, clause  $2(g)(5)^*$ , of the Rules of the House of Representatives, witnesses are asked to disclose the following information. Please complete this form electronically by filling in the provided blanks.

Committee: Energy and Commerce
Subcommittee: Health
Hearing Date: December 10, 2019
Hearing Title :
"Proposals to Achieve Universal Health Care Coverage."
Witness Name: Douglas Holtz-Eakin
Position/Title: President of American Action Forum
Witness Type: ○ Governmental • Non-governmental
Are you representing yourself or an organization?   Self  Organization
If you are representing an organization, please list what entity or entities you are representing:
If you are a <u>non-governmental witness</u> , please list any federal grants or contracts (including subgrants or subcontracts) related to the hearing's subject matter that you or the organization(s) you represent at this hearing received in the current calendar year and previous two calendar years. Include the source and amount of each grant or contract. If necessary, attach additional sheet(s) to provide more information.
If you are a <u>non-governmental witness</u> , please list any contracts or payments originating with a foreign government and related to the hearing's subject matter that you or the organization(s) you represent at this hearing received in the current year and previous two calendar years. Include the amount and country of origin of each contract or payment. <i>If necessary, attach additional sheet(s) to provide more information</i> .